

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

ADDRESS (number and street) ▼

P O BOX 500

☐ Check if different than previously reported. (ACC)

RENVILLE

MN

56284

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00166348

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☒ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer IAN O'CONNELL

Signature of Treasurer

IAN O'CONNELL

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
06 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2015		101980.72
(b) Cash on Hand at Beginning of Reporting Period.....	95648.10	
(c) Total Receipts (from Line 19)	132.88	72795.26
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	95780.98	174775.98
7. Total Disbursements (from Line 31)	20144.13	99139.13
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	75636.85	75636.85
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y
06 01 2015

To:

M M / D D / Y Y Y Y Y
06 30 2015

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

0.00

61490.59

(ii) Unitemized

120.00

11189.83

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

120.00

72680.42

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

120.00

72680.42

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

12.88

114.84

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

132.88

72795.26

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

132.88

72795.26

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	144.13	1139.13
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	144.13	1139.13
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	20000.00	88000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	10000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	20144.13	99139.13
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	20144.13	99139.13

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	120.00	72680.42
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	120.00	72680.42
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	144.13	1139.13
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	144.13	1139.13

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 6 OF 11

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. BENISHEK FOR CONGRESS, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2015

Mailing Address PO BOX 108

City	State	Zip Code
GLADSTONE	MI	49837

Transaction ID : SB23.21872Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1000.00

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: MI District: 01

Full Name (Last, First, Middle Initial)

B. DANIEL WEBSTER FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2015

Mailing Address 3400 OLD WINTER GARDEN ROAD

City	State	Zip Code
ORLANDO	FL	32805

Transaction ID : SB23.21891Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1000.00

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: FL District: 10

Full Name (Last, First, Middle Initial)

C. DEMOCRATS WIN SEATS (DWS PAC)

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2015

Mailing Address PO BOX 83142

City	State	Zip Code
GAITHERSBURG	MD	20883

Transaction ID : SB23.21875Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1000.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2015
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. DONALD NORCROSS FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2015

Mailing Address PO BOX 160

City	State	Zip Code
COLLINGSWOOD	NJ	08108

Transaction ID : SB23.21884Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1000.00

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: NJ District: 01

Full Name (Last, First, Middle Initial)

B. DUFFY FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2015

Mailing Address PO BOX 538

City	State	Zip Code
WAUSAU	WI	54402

Transaction ID : SB23.21879Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1000.00

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: WI District: 07

Full Name (Last, First, Middle Initial)

C. FRIENDS OF DAN KILDEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2015

Mailing Address P.O. BOX 248

City	State	Zip Code
FLINT	MI	48501

Transaction ID : SB23.21880Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1000.00

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: MI District: 05

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. FRIENDS OF JOHN THUNE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2015

Mailing Address 200 NORTH PHILLIPS AVENUE STE L101

City	State	Zip Code
SIOUX FALLS	SD	57104

Transaction ID : SB23.21889Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1000.00

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: SD District: 00

Full Name (Last, First, Middle Initial)

B. KLOBUCHAR FOR MINNESOTA

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2015

Mailing Address PO BOX 4146

City	State	Zip Code
ST PAUL	MN	55104

Transaction ID : SB23.21881Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1000.00

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2018
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: MN District: 00

Full Name (Last, First, Middle Initial)

C. MALONEY FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2015

Mailing Address 49 EAST 92ND ST

City	State	Zip Code
NEW YORK	NY	10128

Transaction ID : SB23.21882Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1000.00

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: NY District: 12

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 11

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. MORAN FOR KANSAS

Mailing Address PO BOX 1151

City	State	Zip Code
HAYS	KS	67601

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President
State: KS	District: 00

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	22	/	2015

Transaction ID : SB23.21883

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. PETE AGUILAR FOR CONGRESS

Mailing Address PO BOX 10954

City	State	Zip Code
SAN BERNARDINO	CA	92423

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State: CA	District: 31

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	22	/	2015

Transaction ID : SB23.21870

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. RODNEY FOR CONGRESS

Mailing Address PO BOX 344

City	State	Zip Code
TAYLORVILLE	IL	62568

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State: IL	District: 13

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	22	/	2015

Transaction ID : SB23.21874

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 11

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. STRICKLAND FOR SENATE

Mailing Address PO BOX 2196

City COLUMBUS	State OH	Zip Code 43216
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Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President
State: OH	District: 00

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2015

Transaction ID : SB23.21887

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. TAMMY FOR ILLINOIS

Mailing Address PO BOX 59348

City SCHAUMBURG	State IL	Zip Code 60159
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Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President
State: IL	District: 00

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2015

Transaction ID : SB23.21877

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. TIM WALZ FOR US CONGRESS

Mailing Address PO BOX 938

City MANKATO	State MN	Zip Code 56002
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Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State: MN	District: 01

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2015

Transaction ID : SB23.21890

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7000.00

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	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

A. TOM ROONEY FOR CONGRESS

Date of Disbursement

Transaction ID : SB23.21886

Category/
Type

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 17

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....

1000.00

TOTAL This Period (last page this line number only).....

20000.00